



KENTUCKY TRANSPORTATION CABINET
Division of Professional Services
**CONSULTING ENGINEER AND RELATED SERVICES PREQUALIFICATION
APPLICATION**

TC 40-1
9/2010
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NAME OF FIRM:	DATE:	STATE: YEAR ESTABLISHED:	
MAIN OFFICE:		TELEPHONE NUMBER:	
Street:	City:	State: Zip:	
KENTUCKY BRANCH OFFICE #1:		TELEPHONE NUMBER:	
Street:	City:	State: Zip:	
KENTUCKY BRANCH OFFICE #2:		TELEPHONE NUMBER:	
Street:	City:	State: Zip:	
CHECK THE PREFERRED MAILING ADDRESS:			
<input type="checkbox"/> Main Office <input type="checkbox"/> Kentucky Branch Office #1 <input type="checkbox"/> Kentucky Branch Office #2			
WEB SITE ADDRESS:	E-MAIL ADDRESS:	FAX NUMBER:	
This application is based on the following factors: (Check appropriate designation)			
ORGANIZATION	TYPE OF APPLICATION	CERTIFIED DBE IN KENTUCKY	TOTAL EMPLOYEES IN FIRM
<input type="checkbox"/> Individual	<input type="checkbox"/> New	<input type="checkbox"/> Yes	_____ Minority Female
<input type="checkbox"/> Partnership	<input type="checkbox"/> Updated	<input type="checkbox"/> No	_____ Minority Male
<input type="checkbox"/> Corporation	<input type="checkbox"/> Reinstatement	(If yes, attach a copy of KYTC certification letter.)	_____ Non-Minority Female
<input type="checkbox"/> Professional Limited Liability Company			_____ Total Employees in Firm
			_____ Total Employees in Kentucky Offices
			_____ Total PE's in Kentucky Offices
Federal Identification Number: _____			
Is firm licensed with Kentucky State Board of Licensure for Professional Engineers and Land Surveyors?			
<input type="checkbox"/> Yes <input type="checkbox"/> No License Number: _____			
I certify the information contained within this application is accurate. SUBMISSION OF FALSE INFORMATION IS CAUSE FOR DENIAL OF PREQUALIFICATION WITH THE KENTUCKY TRANSPORTATION CABINET.			
Name of Firm or Individual Submitting Application: _____			
Signature: _____			
Name of Person Signing: _____			
Title of Person Signing: _____			
Date: _____			

INDICATE TYPES OF PROJECTS FOR WHICH YOUR FIRM REQUESTS PREQUALIFICATION**ROADWAY DESIGN**

- ☐ Rural Roadway Design
- ☐ Urban Roadway Design
- ☐ Surveying
- ☐ Photogrammetry and Related Services

STRUCTURE DESIGN

- ☐ Structure Design - Spans Under 500 Feet
- ☐ Structure Design - Spans Greater Than 500 Feet

TRAFFIC ENGINEERING

- ☐ Traffic Engineering Services
- ☐ Electrical Engineering Traffic Signal Services
- ☐ Electrical Engineering roadway Lighting Services

CONSTRUCTION ENGINEERING SERVICES

- ☐ Construction Project Supervision
- ☐ Bridge Painting Project Inspection
- ☐ Bridge Painting Project Management
- ☐ Structural Steel Fabrication Inspection
- ☐ Construction Scheduling / Claims Analysis

TRANSPORTATION PLANNING / CORRIDOR PLANNING

- ☐ Highway Planning Services
- ☐ Transportation Corridor & Systems Planning
- ☐ Road Centerline Data Collection
- ☐ Traffic Data Collection
- ☐ Traffic Forecasting
- ☐ Travel Demand and Simulation Modeling
- ☐ Pedestrian and Bicycle Facility Planning and Design

TRANSPORTATION DELIVERY SYSTEMS

- ☐ Transit Technical Studies
- ☐ Transit Management
- ☐ Transit Marketing / Advertising

INTELLIGENT VEHICLE / HIGHWAY SYSTEMS

- ☐ IVHS - ITS / Central Concepts
- ☐ ITS / System Integrator
- ☐ ITS / Architecture Development
- ☐ ITS / Concept Development Feasibility Studies
- ☐ ITS / Communications Planning and Development
- ☐ ITS / System Deployment
- ☐ ITS / Management and Operations
- ☐ ITS / Technology / System Evaluation
- ☐ Congestion Management Engineering

GEOTECHNICAL SERVICES

- ☐ Drilling Services
- ☐ Engineering Services
- ☐ Laboratory Testing Services

HIGHWAY OPERATIONS / BRIDGE MAINTENANCE SERVICES

- ☐ In-depth Structure Inspection
- ☐ Underwater Structure Inspection
- ☐ Environmental Monitoring

AVIATION

- ☐ Aviation Systems Planning
- ☐ Airport Master Planning
- ☐ Airport Design
- ☐ Airport Project Inspection
- ☐ Airport Noise Analysis

ENVIRONMENTAL AQUATIC & TERRESTRIAL ECOSYSTEMS ANALYSIS

- ☐ Fisheries
- ☐ Macroinvertebrates
- ☐ Water Quality
- ☐ Botany
- ☐ Zoology
- ☐ Wetlands

ENVIRONMENTAL ARCHAEOLOGY AND OTHER SERVICES

- ☐ Prehistoric
- ☐ Historic
- ☐ Highway Noise
- ☐ Air Quality Analysis
- ☐ Stream Mitigation
- ☐ Socioeconomic Analysis
- ☐ Cultural-Historic Analysis
- ☐ EIS Writing and Coordination

ENVIRONMENTAL AND UST SERVICES

- ☐ Hazmat Preliminary Site Assessment (Phase 1)
- ☐ Hazmat Site Recon / Sampling (Phase 2)
- ☐ Hazmat Laboratory Services
- ☐ Hazmat Remediation Services
- ☐ UST Preliminary Site Assessment
- ☐ UST Leak Detection / Monitoring
- ☐ UST Tank Removal / Disposal
- ☐ UST Remediation Services

**TOTAL NUMBER OF FULL-TIME PERSONNEL IN YOUR ORGANIZATION
INCLUDING KEY PERSONNEL**

(Identify Persons Listed in More Than One Classification)

() – Indicates duplicate function.

PRIMARY FUNCTIONAL CLASSIFICATION	KENTUCKY OFFICES	OFFICES IN OTHER STATES	TOTAL
Structural Engineers			
Highway Design Engineers			
Surveyors (PLS's)			
Certified Photogrametrists			
Transportation Planning Engineers			
Licensed Landscape Architects			
EIT's			
Geotechnical Engineers			
Construction Engineers			
Environmental Engineers			
Traffic Engineers			
Certified Diver / Civil Engineer (PE)			
Technologist / Technician			
Planners			
Draftsman			
CADD Operators			
Geotechnical Technicians			
Drillers			

**TOTAL NUMBER OF FULL-TIME PERSONNEL IN YOUR ORGANIZATION
INCLUDING KEY PERSONNEL**

(Identify Persons Listed in More Than One Classification)

() – Indicates duplicate function.

PRIMARY FUNCTIONAL CLASSIFICATION	KENTUCKY OFFICES	OFFICES IN OTHER STATES	TOTAL
Construction Inspectors			
Geologists			
Architects			
Archaeologists			
Socio-Economic Specialists			
Noise Specialists			
Air Quality Specialists			
Historians			
Terrestrial Ecosystem Specialists			
Aquatic Ecosystem Specialists			
Hazardous Waste / UST Specialists			
EIS / Technical Writers			
Mechanical Engineers			
Electrical Engineers			
Certified Welding Inspectors (AWS QCI CWI)			
Non-Destructive Testing Inspector of Welds			
Other (Please List)			

OWNERS AND OFFICERS OF FIRM (include title):**Key Personnel of Firm:** (Names and years of experience of full time employees only)

A. Highway Design Engineers	L. UST / Hazmat Specialists:
B. Structural Engineers:	M. Landscape Architects:
C. Transportation Planning Engineers:	N. EIS Writers:
D. Traffic Engineers:	O. Historians:
E. Surveyors:	P. Socio-Economic Specialists:
F. Planners (indicate specialty):	Q. Air Quality Experts:
G. Construction Engineers:	R. Noise Specialists
H. Electrical Engineers (indicate specialty):	S. Aquatic Ecosystem Specialists 1. Fisheries 2. Macroinvertebrates 3. Water Quality
I. Environmental Engineers:	T. Terrestrial Ecosystem Specialists 1. Botany 2. Zoology 3. Wetlands
J. Geotechnical:	U. Archaeologists 1. Prehistoric 2. Historic
K. Geologists:	

INDICATE MEMBERS OF YOUR FIRM THAT ARE LICENSED PROFESSIONAL ENGINEERS IN KENTUCKY:
(Name, Type, and Number are required.)

Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____
Name: _____	Type: _____	Number: _____

OUTSIDE ASSOCIATES AND CONSULTANTS USUALLY EMPLOYED BY YOUR FIRM

CATEGORY	NAME OF FIRM OR INDIVIDUAL ADDRESS
A. Civil Engineers	
B. Transportation Planning Engineers	
C. Structural Engineers	
D. Geotechnical Engineers	
E. Photogrammetry	
F. Environmental Specialists (Indicate Specialty)	
G. Architects	
H. Landscape Architects	
I. Other Consultant Affiliations	

PERSONAL HISTORY STATEMENT OF PRINCIPALS AND ASSOCIATES WITHIN YOUR FIRM

(Furnish complete data but keep to essentials.)

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY REGISTRATION:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

PERSONAL HISTORY STATEMENT OF RESPONSIBLE PROFESSIONAL PERSONNEL

(Furnish complete data but keep to essentials.)

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

NAME:			
Last: _____		First: _____ Middle Initial: _____	
YEARS OF EXPERIENCE IN PROFESSION: _____	YEARS AS PRINCIPAL IN THIS FIRM: _____	YEARS AS PRINCIPAL IN OTHER FIRMS: _____	YEARS OF EXPERIENCE OTHER THAN PRINCIPAL: _____
EDUCATION:			
College: _____		Degree: _____ Year: _____ Specialization: _____	
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS _____			
KENTUCKY LICENSURE:			
Type _____		Year in Which You Were First Licensed _____	

PRESENT ACTIVITIES IN WHICH YOUR FIRM IS ASSOCIATED WITH OTHERS:

(Such as Geotechnical, Photogrammetry, Environmental, etc.)

(Indicate phase of work for which your firm is responsible.)

PROJECT:		TYPE OF WORK:	
LOCATION:		OWNER:	
FEE:	ESTIMATED COMPLETION DATE OF SERVICES:	FIRM ASSOCIATED WITH:	
RESPONSIBILITIES			

PROJECT:		TYPE OF WORK:	
LOCATION:		OWNER:	
FEE:	ESTIMATED COMPLETION DATE OF SERVICES:	FIRM ASSOCIATED WITH:	
RESPONSIBILITIES			

PROJECT:		TYPE OF WORK:	
LOCATION:		OWNER:	
FEE:	ESTIMATED COMPLETION DATE OF SERVICES:	FIRM ASSOCIATED WITH:	
RESPONSIBILITIES			

PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
TOTAL NUMBER OF COMPLETED PROJECTS:		TOTAL FEE:
(See next sheet)		(See next sheet)

COMPLETED WORK ON WHICH YOUR FIRM WAS ASSOCIATED WITH OTHER FIRMS DURING THE LAST 10 YEARS:

(Such as Geotechnical, Photogrammetry, Environmental, etc.)

(Indicate phase of work for which your firm is responsible.)

PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT:		TYPE OF WORK:
LOCATION:	ESTIMATED FEE:	YEAR YOUR WORK WAS COMPLETED:
NAME AND ADDRESS OF OWNER:		CONSTRUCTED: <input type="checkbox"/> Yes <input type="checkbox"/> No
TOTAL NUMBER OF COMPLETED PROJECTS:		TOTAL FEE FOR WORK WHICH YOUR FIRM WAS RESPONSIBLE:

LIST TRANSPORTATION PROJECTS KEY PERSONNEL HAVE SUPERVISED:

MAJOR EQUIPMENT:**PHOTOGRAMMETRIC:****ARCHAEOLOGICAL:****NOISE:****SURVEYING:****AIR:****AQUATIC & WATER QUALITY:****TERRESTRIAL:**

COMPUTER EQUIPMENT & SOFTWARE:	
HARDWARE	SOFTWARE

FINANCIAL STATEMENT

BALANCE SHEET AS OF: _____

TOTAL CURRENT ASSETS(Including cash, bid deposits,
notes, receivable, stocks, bonds,
inventories, interest receivable, life
insurance) _____**TOTAL FIXED ASSETS**(Net book value of plant,
equipment, and real estate) _____**TOTAL OTHER ASSETS**(Non-business real estate, land,
building improvements,
miscellaneous) _____**TOTAL ASSETS** _____☐ A Corporation☐ A Partnership☐ Individual☐ Professional Limited Liability Company**TOTAL CURRENT LIABILITIES**(Judgments, accounts / notes payable
owed to subcontractors, accrued taxes,
accrued salaries and payrolls, accrued
interest payable) _____**TOTAL FIXED & OTHER LIABILITIES**(Including mortgage on plant, equipment,
and real estate and other liabilities) _____**NET WORTH**(Including individual or partnership capital
stock, surplus) _____**TOTAL LIABILITIES & NET WORTH** _____